



PTO/SB/22 (12-04)

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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  
FY 2005**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)  
3313-1009P

Application Number 10/607,200-Conf. #5799

Filed June 27, 2003

For **NON-VOLATILE SRAM CELL HAVING SPLIT-GATE TRANSISTORS**

Art Unit 2818 Examiner C. C. Yoha

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|   | Fee    | Small Entity Fee |          |
|---|--------|------------------|----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120  | \$60             | \$ 60.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$450  | \$225            | \$       |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$1020 | \$510            | \$       |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$1590 | \$795            | \$       |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$2160 | \$1080           | \$       |

- ☒ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448. I have enclosed a duplicate copy of this sheet.

- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☐ attorney or agent of record. Registration Number \_\_\_\_\_
- ☒ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 32,334

Joe McKinney Muncy November 21, 2005  
Signature Date

Joe McKinney Muncy (703) 205-8000  
Typed or printed name Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

11/22/2005 JADD01 00000083 10607200  
01 FC-2251 60.00 OP



|   |                     |                          |                        |
|---|---------------------|--------------------------|------------------------|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). |                     | <b>Complete if Known</b> |                        |
| <b>FEE TRANSMITTAL</b><br><b>For FY 2005</b>  |                     | Application Number       | 10/607,200-Conf. #5799 |
|   |                     | Filing Date              | June 27, 2003          |
|   |                     | First Named Inventor     | Shion-Hau LIAW         |
|   |                     | Examiner Name            | C. C. Yoha             |
|   |                     | Art Unit                 | 2818                   |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27           | Attorney Docket No. | 3313-1009P               |                        |
| TOTAL AMOUNT OF PAYMENT   | (\$)                | 60.00                    |                        |

|   |  |
|---|--|
| <b>METHOD OF PAYMENT</b> (check all that apply)   |  |
| <input checked="" type="checkbox"/> Check   | <input type="checkbox"/> Credit Card   |
| <input type="checkbox"/> Money Order  | <input type="checkbox"/> None  |
| <input type="checkbox"/> Other (please identify): _____   |  |
| <input checked="" type="checkbox"/> Deposit Account   | Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u> |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                |  |
| <input type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee                            |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments  |

|   |                     |   |                    |                                       |                                  |                     |                       |
|---|---------------------|---|--------------------|---------------------------------------|----------------------------------|---------------------|-----------------------|
| <b>FEE CALCULATION</b>  |                     |   |                    |                                       |                                  |                     |                       |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                    |                                       |                                  |                     |                       |
|   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b> |                                       | <b>EXAMINATION FEES</b>          |                     |                       |
|   |                     | <u>Small Entity</u>                                     |                    | <u>Small Entity</u>                   |                                  | <u>Small Entity</u> |                       |
| <b>Application Type</b>   | <b>Fee (\$)</b>     | <b>Fee (\$)</b>   | <b>Fee (\$)</b>    | <b>Fee (\$)</b>                       | <b>Fee (\$)</b>                  | <b>Fee (\$)</b>     | <b>Fees Paid (\$)</b> |
| Utility   | 300                 | 150   | 500                | 250                                   | 200                              | 100                 | _____                 |
| Design  | 200                 | 100   | 100                | 50                                    | 130                              | 65                  | _____                 |
| Plant   | 200                 | 100   | 300                | 150                                   | 160                              | 80                  | _____                 |
| Reissue   | 300                 | 150   | 500                | 250                                   | 600                              | 300                 | _____                 |
| Provisional   | 200                 | 100   | 0                  | 0                                     | 0                                | 0                   | _____                 |
|   |                     |   |                    |                                       |                                  |                     | <b>Small Entity</b>   |
| <b>Fee Description</b>  |                     |   |                    |                                       |                                  |                     | <b>Fee (\$)</b>       |
| Each claim over 20 (including Reissues)   |                     |   |                    |                                       |                                  |                     | 50                    |
| Each independent claim over 3 (including Reissues)  |                     |   |                    |                                       |                                  |                     | 200                   |
| Multiple dependent claims   |                     |   |                    |                                       |                                  |                     | 360                   |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>                  | <b>Multiple Dependent Claims</b> |                     |                       |
| <u>15</u>   |                     | <u>- 20 = 0</u>   | <u>x</u>           | <u>=</u>                              | <b>Fee (\$)</b>                  |                     | <b>Fee Paid (\$)</b>  |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>    | <b>Fee Paid (\$)</b>                  |                                  |                     |                       |
| <u>3</u>  |                     | <u>- 3 = 0</u>  | <u>x</u>           | <u>=</u>                              |                                  |                     |                       |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                    |                                       |                                  |                     |                       |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                    |                                       |                                  |                     |                       |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                    | <b>Fee (\$)</b>                       | <b>Fee Paid (\$)</b>             |                     |                       |
| <u>          </u>   | <u>- 100 =</u>      | <u>/50</u>  |                    | <u>(round up to a whole number) x</u> | <u>=</u>                         |                     |                       |
|   |                     |   |                    |                                       |                                  |                     | <b>Fees Paid (\$)</b> |
| <b>4. OTHER FEE(S)</b>  |                     |   |                    |                                       |                                  |                     |                       |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                    |                                       |                                  |                     |                       |
| Other (e.g., late filing surcharge): <u>2251 Extension for response within first month</u>  |                     |   |                    |                                       |                                  |                     | <u>60.00</u>          |

|                     |                    |                                   |                   |
|---------------------|--------------------|-----------------------------------|-------------------|
| <b>SUBMITTED BY</b> |                    |                                   |                   |
| Signature           |                    | Registration No. (Attorney/Agent) | 32,334            |
| Name (Print/Type)   | Joe McKinney Muncy | Telephone                         | (703) 205-8000    |
|                     |                    | Date                              | November 21, 2005 |